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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/001,709	10/23/2001	Yuji Saiki	04558.057001	2960

38834 7590 06/07/2006

WESTERMAN, HATTORI, DANIELS & ADRIAN, LLP  
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EXAMINER

SEFER, AHMED N

ART UNIT PAPER NUMBER

2826

DATE MAILED: 06/07/2006

Please find below and/or attached an Office communication concerning this application or proceeding.

<b>Interview Summary</b>	<b>Application No.</b>	<b>Applicant(s)</b>	
	10/001,709	SAIKI ET AL.	
	<b>Examiner</b>	<b>Art Unit</b>	
	A. Sefer	2826	

All participants (applicant, applicant's representative, PTO personnel):

(1) A. Sefer. (3)\_\_\_\_\_.

(2) Nicholas Seckel. (4)\_\_\_\_\_.

Date of Interview: 5/17/06.

Type: a) ☐ Telephonic b) ☐ Video Conference  
c) ☒ Personal [copy given to: 1) ☐ applicant

2) ☒ applicant's representative  
NATHAN J. FLYNN  
JURY PATENT EXAMINER  
TECHNOLOGY CENTER 2800

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☐ No.  
If Yes, brief description: \_\_\_\_\_.

Claim(s) discussed: 1-34.

Identification of prior art discussed: Kato JP 61-3200, Yoshimi et al. JP 6-59123 and Okumura JP 11-64631.

Agreement with respect to the claims f) ☐ was reached. g) ☒ was not reached. h) ☐ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: Examiner will request full translation of Okumura and/or Yoshimi and will reconsider any arguments/amendments when formally presented.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

\_\_\_\_\_  
Examiner's signature, if required